M13000002999

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	-		
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to	Filing Officer:			
HAY 13 TO				
L. SELLERS				

Office Use Only



100247764281



ACCOUNT NO. : I2000000195

REFERENCE: 645736 7500544

AUTHORIZATION

COST LIMIT

ORDER DATE: May 10, 2013

ORDER TIME : 2:54 PM

ORDER NO. : 645736-005

CUSTOMER NO: 7500544

FOREIGN FILINGS

NAME: ELP WEST PALM, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

.

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BI ISINESS IN THE STATE OF FLORIDA:

1 ELF	ED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA: ELP West Palm, LLC Chame of Foreign Limited Liability Company, must include "Limited Liability Co	mnany"" [C" or "[C")
()4	(Walle of Poteign Enimed Diability Company, must include Enimed Enabling Co	inpany, E.B.C., or EEC.
consent of	ne unavailable, enter alternate name adopted for the purpose of transacting business at of the managers or managing members adopting the alternate name. The alternate any," "L.L.C," "LLC.")	s in Florida and attach a copy of the written and must include "Limited Liability
2. Mary	faryland 3	
(Jurisdi	npany is organized)	mber, if applicable)
4. April	pril 29, 2013 Perpetual 5.	
	(Date of Organization) (Duration: Year lim	
6. Not	Not applicable. This is a new registration for this entity.	
	(Date first transacted business in Florida, if prior to registrat (See sections 608.501 & 608.502 F.S. to determine penalty lia	ion.) bility)
7. ⁷⁰	701 Maiden Choice Lane, Baltimore, MD 21228	
	(Street Address of Principal Office)	
8. If lin	limited liability company is a manager-managed company, check her	e 🗌
9. The	he name and usual business addresses of the managing members or m	anagers are as follows:
	Erickson Living Properties, LLC, 701 Maiden Choice Lane, Baltimore, MD 2	
the jurisdi	ttached is an original certificate of existence, no more than 90 days old, duly authentical isdiction under the law of which it is organized. (A photocopy is not acceptable. If the ation of the certificate under oath of the translator must be submitted.)	russ include "Limited Liability Company," "L.L.C.," or "LLC.") r the purpose of transacting business in Florida and attach a copy of the written ing the alternate name. The alternate name must include "Limited Liability 3.
	Nature of business or purposes to be conducted or promoted in Florid	a: To own, acquire, develop,
0	operate, and manage certain real property.	·
		. 1
	Signature of a member or an authorized representat	
	penalties of perjury that the facts stated herein are true. I am aware that any fa	alse information submitted in a
		O promo
	Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: ELP West Palm, LLC				
If unavailabl	e, the alternate to be used in	the state of Florida is:		
2. The name	e and the Florida street addr	ess of the registered agent and office are:		
	Corporation Service Corr	ipany		
		(Name)		
	1201 Hays Street			
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	32301 FL		
		City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Corporation Service Company

By:

Sue G. Knight

Ässistant Vice President

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ELP WEST PALM, LLC, REGISTERED APRIL 29, 2013, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MAY 10, 2013.

Paul B. Anderson Charter Division

Paul B. Underon



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097